

DISCLOSURE SUMMARY PAGE

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

2010 JUL 20 7-17-10 PM 8:55

COMMITTEE NAME (Must be same as on Statement of Organization)

Gaskill for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: ☐

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Mary Gaskill

Political Party (if applicable)

Democrat

Office Sought

State Representative

District (if Senate or House)

93

FORM**DR-2**

(Rev. 12/2009)

DISCLOSURE
REPORT**For Office Use Only**

Comm. #

Logged In

Scanned

Computer

Audited

1376

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Charles Kern
SIGNATURE OF PERSON FILING REPORT

641-604-8335
TELEPHONE

7-17-10
DATE SIGNED

I AM FILING A 07/19/2010

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

Indicate by # ☐☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 8,825.48

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

2,400.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 11,225.48

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

6,753.01

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 4,472.47

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 0.00

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 8.13

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Gaskill for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
06/05/2010	ID# CK#	Unitemized Contributions	none	\$25.00	<input type="checkbox"/>
06/05/2010	ID# 6089 CK# 495	Operating Engineers Local #234 4880 Hubbell Des Moines, IA 50317	none	500.00	<input type="checkbox"/>
06/05/2010	ID# 6004 CK# 4951	Associated General Contractors of Iowa 701 E Court Ave. Des Moines, IA 50309	none	500.00	<input type="checkbox"/>
06/07/2010	ID# CK#	Gary W. Nielson 2246 Plaen View Drive Iowa City, IA 52246	1st Cousin	50.00	<input type="checkbox"/>
06/12/2010	ID# CK#	Jim Lindenmayer 819 E Alta Vista Ave Ottumwa, IA 52501	none	50.00	<input type="checkbox"/>
06/12/2010	ID# CK#	Bob Morrissey 10768 Bladensburg Rd Ottumwa, IA 52501	none	50.00	<input type="checkbox"/>
06/12/2010	ID# CK#	Thomas A. Rubel 2192 Port Talbot Place Coralville, IA 52241	none	50.00	<input type="checkbox"/>
06/12/2010	ID# CK#	Mick Lawson 1601 N Court St Ottumwa, IA 52501	none	50.00	<input type="checkbox"/>
06/12/2010	ID# CK#	M. Ann Aulwes-Allison 436 E Manning Ottumwa, IA 52501	none	50.00	<input type="checkbox"/>
06/12/2010	ID# CK#	Marlene Sprouse 12 Bear Creek Estates Dr Ottumwa, IA 52501	none	50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1375.00	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Gaskill for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
07/03/2010	ID# 9787 CK# 00015219	United Food and Commercial Workers International, CLC 1775 K Street, N.W., Washington, D.C. 20006-1598	none	\$500.00	<input type="checkbox"/>
07/07/2010	ID# CK#	Ron Stursma 402 Grandview Ave Ottumwa, IA 52501	none	75.00	<input checked="" type="checkbox"/>
07/07/2010	ID# CK#	Unitemized Contributions	none	50.00	<input checked="" type="checkbox"/>
07/07/2010	ID# 6067 CK# 5051	Iowa Health PAC 1775 90th Street West Des Moines, IA 50266	none	250.00	<input checked="" type="checkbox"/>
07/07/2010	ID# CK#	Dana S. Holland 60 Schwartz Dr Ottumwa, IA 52501	none	50.00	<input checked="" type="checkbox"/>
07/10/2010	ID# CK#	Julie A. Meldrem 11801 Rutledge Rd Ottumwa, IA 52501	none	100.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1025.00	
TOTAL (if last page of this schedule)				\$ 2400.00	

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Gaskill for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
06/10/2010	ID# CK# 1187	Strategic Media, Ltd. P.O. Box 2817 Waterloo, IA 50704	Design, postage & print costs	\$ 2146.54
6/18/2010	ID# CK# 1188	Carter Printing 1739 East Grand Ave Des Moines, IA 50316	GOTV Flyers	27.56
6/29/2010	ID# CK# 1189	IDP Truman Fund 5661 Fleur Dr Des Moines, IA 50321	Donation	4000.00
6/30/2010	ID# CK#	South Ottumwa Savings Bank 320 Church St Ottumwa, IA 52501	Service Charge	4.14
07/14/2010	ID# CK# 1190	Angle Mastagni Mathews Political Strategies, LLC, 507 N. Sylvania Ave., Fort Worth, TX 76111	ID calls	574.77
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 6753.01
TOTAL (if last page of this schedule)				\$ 6753.01

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Gaskill for State Representative

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
07/14/2010	Mary Gaskill 59 E 4th Street Ottumwa, IA 52501	self	1/4 on line computer service 6/2/10 to 7/14/10	\$ 8.13	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 8.13	
TOTAL (if last page of this schedule)				\$ 8.13	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule E)